

09/971,999



COPY OF PAPERS
ORIGINALLY FILED

PATENT

SUPPLEMENTAL DECLARATION

RECEIVED

MAY 08 2002

Technology Center 2600

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name, that I believe I am the original, first and sole inventor of the subject matter which is claimed and for which a patent is sought on the invention, design or discovery entitled

METHOD AND APPARATUS FOR MONITORING AND LOGGING THE OPERATION OF A DISTRIBUTED PROCESSING SYSTEM

the specification of which was filed on October 5, 2001 as Application No. 09/971,999; that I have reviewed and understand the contents of the above-identified specification, including the claims as originally filed, that I do not know and do not believe that said invention, design or discovery was ever known or used in the United States of America before my invention or discovery thereof, or patented or described in any printed publication in any country before my invention or discovery thereof, or more than one year prior to this application, or was in public use or on sale in the United States of America more than one year prior to this application; that said invention, design or discovery has not been patented or made the subject of an inventor's certificate issued prior to the date of this Application in any country foreign to the United States of America on an application filed by me or my legal representatives or assigns; and that I acknowledge my duty to disclose information of which I am aware which is material to the examination of this application in accordance with 37 C.F.R. § 1.56 (a).

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issue thereon.

SUPPLEMENTAL DECLARATION

Atty. Dkt. No. ATTA-25,123

Page 1 of 2

Full name of the sole inventor: **Diane L. Peterson**

Inventor's Signature

Diane Peterson

Date

04-12-05

Residence (City, County, State)

Addison, Dallas, Texas

Citizenship **USA**

Post Office Address **P.O. Box 1524, Addison, Texas 76001**

SUPPLEMENTAL DECLARATION

Atty. Dkt. No. ATTA-25,123

Page 2 of 2



COPY OF PAPERS
ORIGINALLY FILED

COPY OF PAPERS
ORIGINALLY FILED

PTO/SB/21 (08-00)

Approved for use through 10/31/2002. OMB 0651-0031
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Application Number	09/971,999
	Filing Date	10/5/2001
	First Named Inventor	Peterson RECEIVED
	Group Art Unit	MAY 08 2002
	Examiner Name	Technology Center 2600
Total Number of Pages in This Submission		3
Attorney Docket Number		ATTA-25,123

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) [REDACTED] <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): [REDACTED]
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	HOWISON, THOMA & ARNOTT, L.L.P.
Signature	
Date	

CERTIFICATE OF MAILING			
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, Washington, DC 20231 on this date: 9/16/02			
Typed or printed name	Gregory M. Howison		
Signature	[Signature]	Date	9/16/02

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.